

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69607	6/13/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	LH	60105	8-15-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	10/27/00
2	12/14/00
3	12/14/00
4	12/14/00
5	12/14/00
6	12/14/00
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Claim	Date
Final Original	
51	12/14/00
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Claim	Date
Final Original	
101	12/14/00
102	12/14/00
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149	12/14/00
150	12/14/00

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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